



STATE OF WASHINGTON
SECRETARY OF STATE

STATEMENT OF CHANGE FOR
REGISTERED AGENT OR OFFICE

(Per Chapter 23B, 24.03, 25.15 RCW)

FEE: \$10.00

- Fill, type or print in black ink.
- Checks made payable to "Secretary of State"
- Sign, date and return original to:

CORPORATIONS DIVISION
801 CAPITOL WAY SOUTH • PO BOX 40234
OLYMPIA, WA 98504-0234



FOR OFFICE USE ONLY

IMPORTANT! Person to Contact about this Filing	Daytime Phone Number (with area code)
Email Address	

Name of Entity	UBI Number
Type of Entity (Check one box) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Profit Corporation <input type="checkbox"/> Non-profit Corporation	
Changes to Registered Agent Information (Check all that apply) <input type="checkbox"/> New Registered Agent Name <input type="checkbox"/> Registered Office Address Change	

NAME AND ADDRESS OF NEW WASHINGTON STATE REGISTERED AGENT		
Name (New Agent) _____		
Street Address (Required) _____		
City _____	State WA	ZIP _____
PO Box (Optional) _____	ZIP _____	
<i>I consent to serve as Registered Agent in the State of Washington for the above named corporation. I understand it will be my responsibility to accept Service of Process on behalf of the corporation; to forward mail to the corporation; and to immediately notify the Office of the Secretary of State if I resign or change the Registered Office Address.</i>		
Signature of Agent _____	Printed Name _____	Date _____

SIGNATURE (Check one box)		
<input type="checkbox"/> Registered Agent (May sign if only change is to the registered office address)		
<input type="checkbox"/> LLC Member or Manager	<input type="checkbox"/> Corporate Officer or Board of Directors Chairperson	
<i>This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.</i>		
Signature _____	Printed Name _____	Date _____

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IMPORTANT! This form must be filled out in its entirety and returned with the appropriate payment for filing.
If you have questions about the requested information on the form please contact our customer assistance at:

CUSTOMER ASSISTANCE – <http://secstate.wa.gov/corps/> or 360/753-7115 (TDD – 360/753-1485)